



CITY OF DULUTH
CITY CLERK'S OFFICE
330 City Hall | 411 West First Street
Duluth, Minnesota 55802-1189
Phone (218) 730-5500
Fax (218) 730-5923

FOR OFFICE USE ONLY

DATE 5-16-17

LICENSE # 760195

GOVERNMENT DATA PRACTICES ACT - CLASSIFICATION WARNING: The data you supply on this form will be used to process the license you are applying for. You are not legally required to provide this data, but we will not be able to process the license without it. Some of the data will be classified as public data if and when the license is granted. Private financial information including a tax identification number and social security number are classified as private data and will be available to governmental personnel and other governmental agencies whose access is necessary to perform their official duties.

LICENSE APPLICATION

LICENSE

TEMPORARY ON SALE LIQUOR 1st Day
Each additional day 2 x \$148.00 =
LEVEL 1 INVESTIGATION FEE (one time)

FEE

\$298.00
\$
\$ 31.00

TOTAL

\$ 298.00
\$ 296.00
\$ 594.00

LICENSEE NAME/ADDRESS/PHONE NO.

Duluth Amateur Hockey Association

TRADE NAME:

DAHA

BUSINESS

PHONE: (218) 728-8000

MANAGER'S NAME & ADDRESS

Jason W. H.

311 N. 26th Ave E

Duluth, MN 55812

PHONE: (218) 390-4994

OWNER OF BUSINESS PREMISES:

- Non-Profit

LICENSE/EVENT DATE: 8/11, 12, 13 / 2017

I HEREBY STATE THAT ALL INFORMATION HERE IS TRUE AND CORRECT AND THAT I SHALL COMPLY WITH ALL PROVISION OF THE ORDINANCES OF THE CITY OF DULUTH AND LAWS OF THE STATE OF MINNESOTA AND THEIR AMENDMENTS.

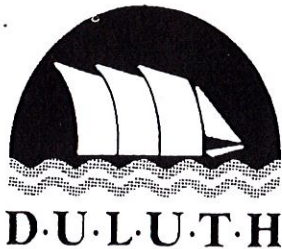
Mailing Address:

120 S. 30th Ave W

Duluth, MN 55806

Signature of Applicant

deha@duluthhockey.com



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APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE

1. Name of Applicant (individual, partnership or corporation or association) that owns the business to be licensed: Duluth Amateur Hockey Association / Jason Watt
2. Trade Name: DAHA
3. Address of place to be licensed: 120 S. 30th Ave W Duluth, MN 55806
4. Designated Serving Areas (i.e. ground floor, second, deck, etc.) Bayfront Festival Park / Vendor
5. Name and address of owner of building: City of Duluth / Bayfront 350 Harbor Dr 55802 Area
Any connection with applicant? No Who receives the rent: None
6. Who will direct the operation of the business or serve as manager on the premises? List name, address & title:
Jason Watt / Executive Director 311 N. 26th Ave E Duluth, MN 55812
- 7.. If partnership, give name of each partner and percent of ownership, and if limited partnership, give details:

8. If corporation, list all stockholders, directors, officers and percent of stock or number of shares owned by each:
non-Profit
9. State approximate distance of this establishment from nearest academy, college, university, church or school:
3 Miles
10. State whether any consideration, money or property, has been paid, or will be paid, given, exchanged or pledged, by anyone, and to whom, for the purchase or operation of this business. State the amounts in detail:

Failure to answer all questions truthfully on this application and attached "Exhibit A" which is made a part thereof, will be just cause for revocation of your license.

I (we) hereby certify that the applicant will be the sole owner and operator of this business to be conducted under the license and I (we) will notify the City Council in writing of any change in ownership in this business before the change is made, for the approval of the Alcohol Gambling & Tobacco Commission and City Council. I (we) have read the foregoing questions, and answers to said questions are true of my knowledge. I (we) will comply with all the provisions of the Alcoholic Beverage Code and the laws and regulations and their amendments.

Signature: [Signature] Date: 5/16/17
Signature: _____ Date: _____



CITY OF DULUTH SUPPLEMENTAL FORM

Additional information is being required by the Duluth Police Department. An incomplete application will result in the delay or rejection of your application.

1. Is this the first time for this event?

Yes ☐ No ☒

If No, how many people attended this event

10,000

If Yes, how many people are you expecting to attend?

2. What kind of advertisement have you done?

None

3. What is the age of the target group for this event?

40-55

4. Will alcohol be sold or given away at this event?

yes

5. Will dancing be allowed at this event?

yes

I understand that as the applicant for this permit/license, I am responsible for the Police/Security for this event. I will provide proof of hired security two weeks prior to the scheduled event.

Applicant Signature

Date

5/16/17

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Is a licensed Peace Officer need for this event _____

If yes, how many licensed peace officers will be required _____